

**CEMETERY AND FUNERAL BUREAU**

1625 N. Market Blvd., S-208
 Sacramento, CA 95834
 (916) 574-7870 Fax (916) 574-8620



Certificate of Authority – Cemetery 2007 1st Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: April 30, 2007

Cemetery Name: _____

License No.: COA _____

COMPLETE THIS PORTION IF YOU HAVE AN ONSITE CREMATORY

- Have you submitted an application for a crematory license? ☐ Yes ☐ No
- If you have been issued a crematory license, list the license number and date issued:
 CR _____ Date Issued _____
- Are you reporting crematory activities on a separate report? ☐ Yes ☐ No

List the total number of interments performed from January 1, 2007 through March 31, 2007. Cremations performed at a licensed crematory located at the cemetery and under common ownership should be reported separately on a crematory quarterly report form.

A.	Number of burials including cremated remains	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
B.	Number of entombments including remains in mausoleum	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
C.	Number of inurnments in columbarium	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
D.	Number of cremations	<i>Include only</i> cremations performed at onsite crematory operating under COA license	_____ x \$8.50 = _____
	Total due (A+B+C+D)		\$ _____

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____

**CEMETERY AND FUNERAL BUREAU**

P. O. Box 989003

West Sacramento, CA 95798-9003

(916) 574-7870 Fax (916) 574-8620



Certificate of Authority – Cemetery 2007 2nd Quarter Report

For Bureau Use Only

License Number

Receipt Number

Date Processed

Due on or before: July 31, 2007**Cemetery Name:** _____**License No.:** COA _____***COMPLETE THIS PORTION IF YOU HAVE AN ONSITE CREMATORY***

- Have you submitted an application for a crematory license? ☐ Yes ☐ No
- If you have been issued a crematory license, list the license number and date issued:
CR _____ Date Issued _____
- Are you reporting crematory activities on a separate report? ☐ Yes ☐ No

List the total number of interments performed from April 1, 2007 through June 30, 2007. Cremations performed at a licensed crematory located at the cemetery and under common ownership should be reported separately on a crematory quarterly report form.

A.	Number of burials including cremated remains	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
B.	Number of entombments including remains in mausoleum	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
C.	Number of inurnments in columbarium	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
D.	Number of cremations	<i>Include only</i> cremations performed at onsite crematory operating under COA license	_____ x \$8.50 = _____
	Total due (A+B+C+D)		\$ _____

Authorized
Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____

**CEMETERY AND FUNERAL BUREAU**

P. O. Box 989003
 West Sacramento, CA 95798-9003
 (916) 574-7870 Fax (916) 574-8620



Certificate of Authority – Cemetery 2007 3rd Quarter Report

Due on or before: October 31, 2007

For Bureau Use Only

License Number

Receipt Number

Date Processed

Cemetery Name: _____

License No.: COA _____

COMPLETE THIS PORTION IF YOU HAVE AN ONSITE CREMATORY

- Have you submitted an application for a crematory license? ☐ Yes ☐ No
- If you have been issued a crematory license, list the license number and date issued:
 CR _____ Date Issued _____
- Are you reporting crematory activities on a separate report? ☐ Yes ☐ No

List the total number of interments performed from July 1, 2007 through September 30, 2007. Cremations performed at a licensed crematory located at the cemetery and under common ownership should be reported separately on a crematory quarterly report form.

A.	Number of burials including cremated remains	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
B.	Number of entombments including remains in mausoleum	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
C.	Number of inurnments in columbarium	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
D.	Number of cremations	<i>Include only</i> cremations performed at onsite crematory operating under COA license	_____ x \$8.50 = _____
	Total due (A+B+C+D)		\$ _____

Authorized
 Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____

**CEMETERY AND FUNERAL BUREAU**

P. O. Box 989003

West Sacramento, CA 95798-9003

(916) 574-7870 Fax (916) 574-8620



Certificate of Authority – Cemetery 2007 4th Quarter Report

Due on or before: January 31, 2008
For Bureau Use Only

License Number _____

Receipt Number _____

Date Processed _____

Cemetery Name: _____

License No.: COA _____

COMPLETE THIS PORTION IF YOU HAVE AN ONSITE CREMATORY

- Have you submitted an application for a crematory license? ☐ Yes ☐ No
- If you have been issued a crematory license, list the license number and date issued:
CR _____ Date Issued _____
- Are you reporting crematory activities on a separate report? ☐ Yes ☐ No

List the total number of interments performed from October 1, 2007 through December 31, 2007. Cremations performed at a licensed crematory located at the cemetery and under common ownership should be reported separately on a crematory quarterly report form.

A.	Number of burials including cremated remains	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
B.	Number of entombments including remains in mausoleum	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
C.	Number of inurnments in columbarium	<i>Do not include</i> cremated remains reported under D, below	_____ x \$8.50 = _____
D.	Number of cremations	<i>Include only</i> cremations performed at onsite crematory operating under COA license	_____ x \$8.50 = _____
	Total due (A+B+C+D)		\$ _____

 Authorized
Signature: _____

Date: _____

Name (print): _____

Title: _____

Telephone: _____